Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethlcs



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest Information received by a department or accepted by the Governor on behalf of the state

For office use only	
Indexed	
Audited	
Checked	
Computer	

DHS Cherokee Mental Health Institute	
Name of Department or Office 1251 West Cedar Loop	Cherokee, Iowa 51012
Malling Address	City, State, Zip Code
712-225-2594	
Area Code & Telephone No.	OCCIOE.
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR	OFFICE:
Katelyn Matheny	
Name .	
Mailing Address (if different from above)	City, State, Zip (if different from above)
kmathen@dhs, state, ia.us	Area Code & Telephone Number (if different from above)
Email Address	Area Code & Telephone Number (il different from above)
Malling Address City, State, Zlp Code Area Code & Telephone Number	December 21, 2018 \$10.00 Date of Gift or Bequest Amount/Value* *value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
Email Address (optional)	
the second secon	
Provide a description of the gift or bequest and purpose thereof:	
One small bag of previously used clothing.	
Criteria to use this form:	
Receipt of any gift or bequest that is received by any department	of the state or received by the Governor on behalf of the state.

assessment of the fair market value (If applicable) is correct and true to the best of my knowledge.

12/21/18 Date